



## Inspection Report on

**Caring Companions Limited**

**Caring Companions Ltd  
Unit 31  
Enterprise Centre Bryn Road  
Bridgend  
CF32 9BS**

**Date Inspection Completed**

**04/03/2021**

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## About Caring Companions Limited

Type of care provided	Domiciliary Support Service
Registered Provider	Caring Companions Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">12/09/2019</a>
Does this service provide the Welsh Language active offer?	No

### Summary

Caring Companions LTD is a domiciliary support service that provides care and support for adults throughout the Cardiff and Vale regional partnership area. The agencies office is located in Bridgend. There is a manager who is registered with Social Care Wales. The Responsible Individual (RI) is Colin Evans who provides strategic oversight and is actively involved in the day-to-day running of the business.

Generally people are happy with the care and support that the service provides. Staff are familiar with the needs and wants of the people they support, and are trained to provide a quality service. There is a recruitment process in place that ensures staff are suitable for employment as well as other systems that act to protect people from harm.

Improvements have been made since the last inspection. However, further improvements are required in relation to RI visits and the quality of care review to ensure the service is fully meeting legal requirements.

## Well-being

People are treated with dignity and respect by a team of care workers that deliver services. People and their representatives speak highly of the care workers working for the service. Care workers have fostered positive working relationships with the people they support and have a good understanding of people's needs, wants and preferences.

People are consulted about the care and support they receive. Personal plans are developed in conjunction with the person and their representatives and regular reviews ensure plans are current. However, Improvements are required in the care planning process to ensure people's personal outcomes are identified. The service uses an electronic care monitoring system. This allows care workers to communicate any queries or issues with office staff and for any changes to rotas or care tasks to be communicated quickly.

The service adopts measures to keep people safe. Each person the service supports has individualised risk assessments that are reviewed on a three monthly basis in line with the personal plan. Policies, procedures and training equip care staff with skills and knowledge that enable them to carry out their work safely. Staff members we spoke to showed comprehensive knowledge of safeguarding procedures and knew how to raise a concern. A robust recruitment process ensures staff members are suitable to work with vulnerable adults. Staff have up to date information regarding Covid-19. People using the service told us that staff consistently use personal protective equipment (PPE) and that they feel safe with staff entering their homes. Staff also undergo weekly Covid-19 testing in order to minimise the risk of infection.

## Care and Support

The service provides a good standard of care and support to adults with a range of needs. We spoke to six people who use the service all of which provided positive feedback on the care workers that provide their care and support. People used words like *“the carers are really attentive. They do understand my condition”*. And *“the carers are pretty good. On the whole I have no complaints”*. *They listen to the way I want things done”*. People also told us that in general care workers arrive on time and do not rush to complete set tasks. Call records and rotas show that the service allows travel time between visits.

Personal plans require development to ensure they are meeting people’s personal outcomes. We looked at six personal plans and found they were reviewed every three months in conjunction with the individual. These reviews were conducted via telephone due to Covid-19 restrictions. Personal plans contained important information such as the person’s medical history, personal history and risk assessments that were also reviewed and updated accordingly. Each file contained a service delivery plan which gave a clear picture of tasks care staff are required to undertake at each visit. Although these plans were very detailed they did not identify what outcomes the person wanted to achieve and how they would like their care and support delivered. We discussed this with the management team who agreed that this was an area that requires developing.

There are systems in place that protect people from harm and abuse. The service’s safeguarding policy contains up to date information and reflects the new ‘Wales Safeguarding Procedures’. Staff have access to this information via an application on their mobile phones. Staff also receive specific safeguarding training that equips them with practical knowledge on how to spot the signs of abuse and how to raise a concern. All staff we spoke to told us that they felt confident in their ability to report concerns if they needed to do so.

People benefit from the safe administration of medication. Each individual has a medication assessment on file that indicates the level of support they require. This ranges from prompting to full administration. A sample of medication administration records (MAR) charts showed medication is administered effectively. The service completes monthly medication audits to ensure safety and to identify any errors in recording systems. There is a medication policy in place that provides overarching guidance on the administration of medication and staff undergo training to ensure they are competent in administering people’s medication.

## Leadership and Management

There are measures in place that ensure staff are fit to work with vulnerable people. We looked at a number of staff files and found them to contain information such as employment history, qualifications and references. Disclosure and Barring Service (DBS) checks for each employee are current and reviewed periodically. On the commencement of employment new staff members are required to complete an induction and undertake shadow shifts with established staff members. This gives the new staff member the opportunity to meet the people they will be supporting as well as giving them practical knowledge on service delivery.

Staff feel supported within their roles and have access to a programme of training and development. Staff members told us they have regular supervision sessions and that managers are on hand to provide support and guidance if needed. Supervision records indicate that sessions happen on a three monthly basis in line with regulatory requirements. Staff also receive an annual appraisal to monitor overall performance. Regular team meetings allow staff to discuss operational matters and acquire information such as updates in relation to the Covid-19 pandemic. As well as a formal induction there is an ongoing programme of training and development opportunities. Staff told us the training offered by the provider equips them with the skills to carry out their roles effectively. We examined the services training records and found that all staff were up to date with the services core training. The management team told us that online training has replaced traditional 'face to face' training due to the Covid-19 pandemic.

The service has policies and procedures in place that underpin service delivery. We examined a range of policies and procedures and found them to be comprehensive and informative. These documents are reviewed periodically and contain up to date legislation on matters such as safeguarding. Records of complaints over the past twelve months show that all issues were resolved in line with the services complaints procedure.

Governance, auditing and quality assurance arrangements need developing further in order to meet legal requirements. On the whole the service operates well. However, the RI is not compliant with regulation with regards to three monthly service overview visits and six monthly quality of care reports including the analysis of complaints. We did not issue a notice on this occasion, as there was no immediate or significant impact for people using the service. We expect the RI to take action to rectify the matter and we will follow this up at the next inspection.

## **Environment**

A domiciliary care service inspection does not consider the environment.

**Areas for improvement and action at, or since, the previous inspection. Achieved****Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None

**Areas where priority action is required**

None

**Areas where improvement is required**

No documented evidence produced to show that RI has met with members of staff who are employed by the service

Regulation 73(2)(a)

Quality of Care Review - Reports do not detail information relating to the analysis of aggregated data including complaints and safeguarding matters

Regulation 80(3)(b)(c)

The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.



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